

**ANR Form 4: Certification Statement for Notification of Overshadowed Property Owner(s) pursuant to the Wastewater System and Potable Water Supply Program**

A person submitting an application to the Secretary for a Wastewater System and Potable Water Supply Permit where the proposed project has isolation distances (overshadowing) that extend onto property owned by persons other than the permit applicant shall submit the following certification with the application.

Note: When the property subject to the permit application is owned by more than one person, only one of the landowners must sign this certification statement even though all landowners must sign the permit application itself.

**I hereby certify that the individual(s) that own property that is overshadowed by my proposed project have been sent by certified mail a copy of the required notification form and the site plan(s) that accurately depicts all isolation distances. I also certify that I attached to this certification form a copy of all certified mail receipts for notifications that were sent to the affected property owners.**

Signature \_\_\_\_\_

Name (Printed) \_\_\_\_\_

Property Address or Property Tax ID # \_\_\_\_\_

Date of this certification \_\_\_\_\_

Please list all of the property owners who were sent a notification by certified mail.

**Affected Property Owner(s) – (Please provide a second sheet using this format when there are more than three affected property owners)**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

(To Comply with Act 145 and Act 117 – 8-24-12, Last Revised 9-11-12)